UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attorney Docket No. 01272.020632		
First Name	ed Inventor or Application Identifier	
OSAMU KANOME, ET AL.		
Express Mail Label No.		

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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
	1. X	Fee Transmittal I (Submit an original	smittal Form n original, and a duplicate for fee processing)			7.				
	2.	Applicant claims See 37 CFR 1.27	claims small entity status. FR 1.27.			8.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
	3. X	Specification	tion Total Pages 111				a	Computer Readal	ole Form (CRF)	
	4. X	Drawing(s) (35 U	SC 113) Total S	theets 38				cation Sequence L	-	8 U.S 0/670
	5. X	Oath or Declaration	on <i>Total P</i>	ages 2			i. [ii. [CD-ROM or CD-	R (2 copies); or	3110
a. X Newly executed (original or copy)				c. Statements verifying identity of above copies						
1		b. Copy fr		·		Ĺ	ACCOMPANYING APPLICATION			
		(for con	om a prior application tinuation/divisional wit	(37 CFR 1.63(d)) h Box 17 completed)		9. X				
		i	DELETION OF IN Signed Statement a	attached deleting inventor(s)		10.	37 CFR 3.7 (when ther	3(b) Statement e is an assignee)	Power	of Attorney
	named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				R	11.	and an analysis of the state of			
	6. X	Application Data S	Sheet. See 37 CFR 1	.76		12.		Disclosure (IDS)/PTO-1449	Copie:	s of IDS ons
l						13.	Preliminary	Amendment		
						14. X	Return Red (Should be	eipt Postcard (MP specifically itemize	EP 503) ed)	
					15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
						16. Other:				
						{				
H	7. If a CC	ONTINUING APPI	ICATION, check app	roprioto have and acc		L				
				nopriate bux and su	оріу тп	e requisite inf	ormation:			
Continuation Divisional Continuation-in-par Prior application information: Examiner				rt (CIP) of prior application No/ Group/Art Unit:						
f	For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is relied upon when a portion has been inadvertently omitted from the submitted application parts.									
				The state of the s	applica	ation parts.				
ſ	18. CORRESPONDENCE ADDRESS 05514									
X Customer Number or Bar Code Label (Insert Customer No. or Atta			ch bar code label here) or Correspondence address below			elow				
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
	TOTAL CLAIMS (37 CFR 1.16(c))	26-20 =	6	X \$ 18.00 =	\$108.00	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		12-3 =	9	X \$ 84.00 =	\$756.00	
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$280.00 =	\$0.00	
BASIC FEE (37 CFR 1.16(a))					\$750.00	
	<u></u>		Total of	above Calculations =	\$1614.00	
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).					
	TOTAL =					
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	0. X A check in the amount of \$1614.00 to cover the filing fee is enclosed.					
r-	X A check in the am	ount of \$ <u>1614.00</u> to	cover the filing fee is e	nclosed.		
20.	X A check in the am	ount of \$40.00 to	cover the recordal fee	s enclosed.		
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20. [21. [A check in the am he Commissioner is herel o. 06-1205: X Fees req	ount of \$40.00 to	cover the recordal fee erpayments or charge t	s enclosed.	eposit Account	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Scott D. Malpede - Reg. No. 32,533		
SIGNATURE	Just D. Walter		
DATE	September 26, 2003		

SDM/kkv

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